PATENT APPLICATION FEE DETERMINATION RECORD Approved in Paperwork Reduction Act of 1995, no possible are required to respond to a collection of information unite Substitute for Form PTO-875									dor, U.S. DEPARTMENT OF COMPAN on it displays at yeard OMB conflor and Application or Doctor Number			
APPLICATION AS FILED - PART ((Column 1) (Column 2)						· SMALL ENTITY			. (OTHER THAN SMALL ENTITY		
FOR BASIC FEE	NUMBER	RILED .	NUMBER EXTRA		RATE		FEE (#)	7				
(87 OFR 1.16(s), (b), or (c) SEARCH FEE	9		• •		1		- (FE (9)		RATE	(f)	FEE(f)	
. (87 OFR 1.16(14), (7), or (11)). :		•					1	<u> </u>			
EXAMINATION FEE (8) OFR 1.16(0), (p), or (d)	1			7				1				
TOTAL CLAMS (87 OFT: 1,16(II)		devisor A	· · · · · ·	-	<u> </u>							
INDEPENDENT CLAIM (87 OFR 1.16(h))	8	ilmus 20 =			<u>×</u> .			OR.	x	=		
		ninus s = 4	Ange over ad de	<u>.</u>	×	ż.		٠.	, X			
APPLICATION SIZE		If the specification and drawings sheets of paper, the application is \$250 (\$125 for small entity) for						` -		-		
(97 CFR 1.16(s))	I egricottal oc	Sineedo our fracei	an thomas on	. []	•		. 1		-	- 1		
	1 30 0.0,0, 41	a)(1)(G) and 3	7 CFR 1.16(s).		·			[-	•	
MULTIPLE DEPENDENT				_				t				
"If the difference in column 1 is less than zero, enter "o" in column 2. TOTAL												
1	TION AS AME		•	•	10114		——— <u>—</u>		TOTAL	L		
ובמוחו			·			•					.: :	
	olumn 1) CLAIMS	(Columin		<u>.</u>	8MAL	LENTT	Y	OR	OTHI	ER TH	M .	
≺ RE	MAINING AFTER	NUMBER	PRESENT	11.	RATE (\$)	AC	OI-	Г		1		
Total AM	NOMENT	PREVIOUS PAID FOR		IJĹ		.] [10	NAL (\$)	- 1	RATE (6)	า ก	NODI-	
.≥ (07.07R1.86(0)	20 Minus	123	- Ø	\prod_{x}	25 ⁹²		1.		500	1-8	E5(6)	
tridepandent (AT OFR 1.45(4))	3 Minus	3	* Ø	1 -	00 =	1		R X		 	7-1	
					<u> </u>	-	+-1 9	RX	200=	 /	<u></u>	
FIRST PRESENTATION (OF MULTIPLE DEPEN	BENT CLAIM : (87	OFR 1.16(I))		•		† ~	.		1-1		
					TAL	-	 	TO	TAL.			
(Colu	mn 1)	- (Oolumn 2)	(Only 100 100 100 100 100 100 100 100 100 10	. AU	D'LFEE	L	1 1∶œ	ADE	O'L FEE		<u>.</u>	
G	UNING UNING	HIGHEST	(Column 9)	<u></u>			<u>-\</u>			• !		
_	TER DMENT	NUMBER PREVIOUSLY	PRESENT EXTRA	. RA	(TE(B)	ADDI		· RA	ine (s)	ADI		
Total AMEN	. Minus	PAIDFOR	=	-		FEE (ļ		1101 FEE		
Independent 4	Minus	***	-	×	+		. OR	х.	-		7	
Application Stze Fee (37 CFR 1.16(c))			×.	=		OR	x					
PREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (67 OFR 1.16(1))					-		7			<u> </u>	ゴ	
The state of the s		TI CLAIM (87 OF	R 1.16(1)	<u></u>			OR	L	T		7 .	
	TOTAL ADDL	i I		OR	TOTAL			7				
* If the entry in column 1 is ** If the "Highest Number Pri	less than the entry t	n column 2, write	"O" in column 3.		L		」 ∷	ADDIL	FEE _			
If the "Highest Number Pro	Mously Pald For IN	THIS SPACE &	less than 20, end	er 20".		-				•	1.	

The Highest Number Previously Paid For In This SPACE is less than 3, enter "3".

The Highest Number Previously Paid For Introduction independent is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FIES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.